

TOWN OF ROTTERDAM

APPLICATION TO CONDUCT A GOING OUT OF BUSINESS SALE

Mail To: Diane M. Marco, Town Clerk

1100 Sunrise Blvd.

Rotterdam, NY 12306

518-355-7575 Ext: 352

Application Fee \$75.00

(Please Print)

I, the undersigned, hereby swear to the truth of the following statements:

1. Name of Applicant(s): _____

2. Residence(s) _____

3. Citizenship: Native Born _____ Naturalized _____ Not a citizen _____ Declared intention _____

4. Assumed or Trade Name (if any): _____

5. True owner of merchandise to be sold: _____

6. If partnership or corporation, give following information of partners or officers:

<u>Name</u>	<u>Title</u>	<u>Residence</u>	<u>Citizenship</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

7. Was controlling interest in corporation transferred in the past six (6) months? Yes _____ No _____

Date of incorporation: _____

Principal Office: _____

8. Place of sale: _____

No. of years doing business at this location: _____

9. Describe the premises where it is intended to conduct the sale, the nature of the occupancy, whether by lease or sub-lease, and the dates of beginning and termination of such occupancy:

10. Is this business to be re-opened at another location? Yes _____ No _____ If yes, give address _____

Under the name of: _____

State type of sale to be conducted: _____

11. Specify any and all mediums of advertising to be used (newspapers, posters, placards, etc):

12. Date proposed sale is to begin: _____

13. Reason for sale: _____ Specify type of goods, wares, or merchandise to be offered for sale: _____

14. Has license ever been applied for or granted for the premises for which this application is made? _____

15. Has a special license heretofore issued to the applicant or for the premises ever been suspended or revoked? _____

16. Has the applicant ever been brought up on charges before any court, or city, state, federal agency for false or misleading representation with respect to any other offer for sale or sales? _____

(This question applies to every member of a partnership and all officers or a corporation, if the applicant is such).

Applicant Signature _____ Date _____